



## Supplemental Application Data Sheet

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### Inventor Information

Applicant Authority Type:: Inventor  
Primary Citizenship: United States of America  
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State or Province of Mailing Address:: KY  
Country of Mailing Address:: United States of America  
Postal or Zip Code of Mailing Address:: 40241 40059

### Correspondence Information

Correspondence Customer Number:: 34690

### Application Information

Application Type:: Utility  
Title:: INTERACTIVE AND AUTOMATED TISSUE  
IMAGE ANALYSIS WITH GLOBAL TRAINING  
DATABASE AND VARIABLE-ABSTRACTION  
PROCESSING IN CYTOLOGICAL SPECIMEN

CLASSIFICATION AND LASER CAPTURE  
MICRODISSECTION APPLICATIONS

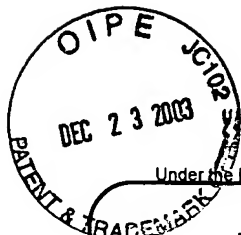
Docket Number: ARC012010000  
Suggested Drawing Figure: 4  
Total Drawing Sheets: 21  
Formal Drawings: No  
Small Entity? Yes

**Representative Information**

Representative Customer Number: 34690

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming the benefit under 35 U.S.C. 119(e)	60/410,433	September 13, 2003



PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/662,765	
	Filing Date	September 15, 2003	
	First Named Inventor	David H. KIL	
	Art Unit	1631	
	Examiner Name	Not yet assigned	
Total Number of Pages in This Submission	3	Attorney Docket Number	ARC012010000

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): --Supplemental Application Data Sheet-2pgs --Return postcard
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Rimas T. Lukas
Signature	
Date	December 19, 2003

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Rimas T. Lukas		
Signature		Date	December 19, 2003

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